with the full list of names. Do not include addresses here.)

UNITED STATES DISTRICT COURT

for the
US District of Montana
Ruff Division

_	Case No.	
Bryan C. Amstrong	- (i	o be filled in by the Clerk's Office)
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	•	
Butte Silverbow County: ED Lester		
Mark Johnson Raylaught captain		
Defendant(s) (Write the full name of each defendant who is being sued. If the '' names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page		•

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	BRYAN CHARLES ARMSTRONG
All other names by which	
you have been known:	
ID Number	
Current Institution	BUTTE DETENTION CENTER
Address	BUTTE MT 155 W QUARTZ
	BUTTE MT 59701
	City State Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1 Name	Chief Mark Johnson
Job or Title (if known)	Monat Day
	<u> </u>
Shield Number	NA
Employer	Bythe Detention Center
Address	Butte MT 155 W Gyartz
	Buttl MT 59201
	City State Zip Code
	Individual capacity Official capacity
Defendant No. 2	
Name	Captain Kay Vaughn
Job or Title (if known)	CAPTAIN
Shield Number	N/A
Employer	BUTTE DETENTION CENTER
Address	BUTTE MT 156 W QUARTZ
	BUTTE MT 59701
	City State Zip Code
	Individual capacity Official capacity

Pro Se 14	(Rev.	12/16) Complaint for Violation of Civil Rights (Prison	er)
		Defendant No. 3	
		Name	ED Lester
		Job or Title (if known)	SHERIFF
		Shield Number	N/A
		Employer	BUTTE SILVERROW SHERIFF
		Address	
			City State Zip Code
			Individual capacity Official capacity
		Defendant No. 4	
		Name	Butte Silverbow County
		Job or Title (if known)	
		Shield Number	
		Employer	
		Address	
			City State Zip Code
			Individual capacity Official capacity
II.	Bas	sis for Jurisdiction	
			or local officials for the "deprivation of any rights, privileges, or
			[federal laws]." Under Bivens v. Six Unknown Named Agents of (1971), you may sue federal officials for the violation of certain
		stitutional rights.	(· · · · · · · · · · · · · · · · · · ·
	Α.	Are you bringing suit against (check	all that applied
	Λ.		•• •
		Federal officials (a Bivens clai	m)
		State or local officials (a § 198	3 claim)
		7	,
	В.	Section 1983 allows claims alleging	the "deprivation of any rights, privileges, or immunities secured by
		the Constitution and [federal laws].	" 42 U.S.C. § 1983. If you are suing under section 1983, what ght(s) do you claim is/are being violated by state or local officials?
		ath 111th	gin(s) do you claim is/are being violated by state or local officials?
		8th and 14th o	imendment by deperuation of
		proper hygiene pr	imendment by deperuation of aducts namely touthpaste
	C.		nly recover for the violation of certain constitutional rights. If you
	٥.	are suing under <i>Bivens</i> , what consti	tutional right(s) do you claim is/are being violated by federal
		officials?	, · · · · · · · · · · · · · · · · · ·

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	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
IN a	nates	did not have toothpasse for several weeks and
hid r	10t.	take method to remeady the issue and address to
III.	Prison	federal law. Attach additional pages if needed. The defendants knew the did not hove toothpasse for several weeks and take method to remeably the issue and address to custom or policy when their vendo was on back order. Clear disreguerd for prisoner hygiene a civil rights e whether you are a prisoner or other confined person as follows (check all that apply):
	Indicat	e whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
IV.	Statom	ent of Claim
	State as alleged further any case	briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite es or statutes. If more than one claim is asserted, number each claim and write a short and plain not of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
		Butte Silverbow Dentention Center

C. What date and approximate time did the events giving rise to your claim(s) occur?

April 30th - May 31st 2024 again July 16th
Aug-17th 2024 Aproximate time did the events giving rise to your claim(s) occur?

April 30th - May 31st 2024 again July 16th -

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?

Was anyone else involved? Who else saw what happened?) EACH Defendant Chose to

Show the disregular of for the tooth paste and quit responding

to grievances. The defondats did not take methods to

remeady the issue and address the custom or policy
with their rendor leaving me to use 'Shampoo' with led to

Stomach problems and gums bleeding as well as bloody

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive. Tooth decay toothloss Stomach ache was taken to the dentist and had many teeth removed "4" the jail will not give me dates for the dentist trips.

VI. Relief

If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

For the acts of having teeth removed and the decay I endured with shampou use In asking the top the act of pain and suffering and for each day without toothpaset in asking to another of the point and which bring us to another too the point and for a punitive damages for a total of \$1,000.

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?	
	Yes	
	☐ No	
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of events giving rise to your claim(s). Butto Silverbow Denter	of the Hun Center
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance	,
2.	procedure?	
	∑ Yes	
	□ No	
	Do not know	
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claims cover some or all of your claims?	(s) arose
	Yes	
	☐ No	
	Do not know	1 ì
	If yes, which claim(s)? I Spoke of the Shortage of	toomposie
an d	If yes, which claim(s)? I Spoke of the shortage of asked for dates to prove my dentist	vislts
to	which I never recived my grievane Jail has been very guarded with	back
the	Jail has been very guarded with	(
Q	grivance process	Page 6 of 11

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D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	□ No
E.	If you did file a grievance:
	1. Where did you file the grievance? Butte Dentenion Center
	2. What did you claim in your grievance? That My prisoner CIVII rights Well being violated
	3. What was the result, if any? DID not ever hear anything back of all
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.) Ve been attempting to for 5 mounts

Pro Se 14 (Res	v. 12/16) Complain	t for Violation	of Civil Rights	(Prisoner)

	F.	If you did not file a grievance:
		1. If there are any reasons why you did not file a grievance, state them here:
		2. If you did not file a gricumage host you did informs officials of your latin state of the sta
		 If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. Please the note that this pail does not
	fo	remedies. Thease take note that this soil does not low the great process
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
VIII.	Previou	s Lawsuits
	the filin brought malicion	ree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying g fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, us, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
	To the b	pest of your knowledge, have you had a case dismissed based on this "three strikes rule"?
	Ye:	S
	⊠ No	
	If yes, s	tate which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
	Yes
	No No
В.	If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit
	Plaintiff(s)
	Defendant(s)
	2. Court (if federal court, name the district; if state court, name the county and State)
	3. Docket or index number
	4. Name of Judge assigned to your case
	5. Approximate date of filing lawsuit
	6. Is the case still pending?
•	Yes
	No
	If no, give the approximate date of disposition.
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entere in your favor? Was the case appealed?)

imprisonment?

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	Yes			
	No			
	our answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)			
	Parties to the previous lawsuit Plaintiff(s) Defendant(s)			
2.	Court (if federal court, name the district; if state court, name the county and State)			
3.	Docket or index number			
4.	Name of Judge assigned to your case			
5.	Approximate date of filing lawsuit			
6.	Is the case still pending? Yes			
	If no, give the approximate date of disposition			
7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)			
	If you more 1. 2. 3. 4.			

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

Α.	For Parties Without an At	torney				
	I agree to provide the Clerk' served. I understand that my in the dismissal of my case.	s Office with any changes to my act y failure to keep a current address of	ddress where ca on file with the	ase-related papers may be Clerk's Office may result		
	Date of signing: $1-2$	le -2025				
	Signature of Plaintiff					
	Printed Name of Plaintiff					
	Prison Identification #					
	Prison Address	155 W Quar Buttu City	MT State	5970\ Zip Code		
В.	For Attorneys					
	Date of signing:					
	Signature of Attorney					
	Printed Name of Attorney					
	Bar Number					
	Name of Law Firm					
	Address					
		City	State	Zip Code		
	Telephone Number					
	E-mail Address					